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| 33649 | 7590 08/08 | /2008 | | | | | mission | |
| Mr. Christophe Jackson Walker 901 Main Street | I h Sta ad tra | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | | | |
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| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTO | R | АТТО | RNEY DOCKET NO. | CONFIRMATION NO. | |
| 09/852,963 | 05/08/2001 | | Michael Tolson | | 101217.00032 4911 | | 4911 | |
| TITLE OF INVENTION | : ARCHITECTURE FO | R A SYSTEM OF PORT | ABLE INFORMATION | AGENTS | | | | |
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| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | \$720 | \$300 | \$0 | · | \$1020 | 11/10/2008 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | | |
| HU, JINSONG | | 2154 | 709-202000 | 3 | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (2007) | | | , , | printing on the patent front page, list Jackson Walker L.L.P. | | | | |
| CFR 1.363). Change of corresp | ondence address (or Cha | nge of Correspondence | 1 (1) the names of 3in to 4 registered natent allorneys 4 | | | | | |
| Change of correspondence address (or Change of Corresponden Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to | | | | | |
| PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. | | | 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
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| PLEASE NOTE: Unl | less an assignee is ident | ified below, no assignee | data will appear on the | patent. If an assign | ee is id | lentified below, the de | ocument has been filed for | |
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| , | | | | B) RESIDENCE: (CITY and STATE OR COUNTRY) Fort Worth, Texas | | | | |
| H.E.B., L | LC | | fort worth, | Texas | | | | |
| Please check the appropr | iate assignee category or | categories (will not be p | rinted on the patent): | Individual XX C | orporati | on or other private gro | up entity Government | |
| 4a. The following fee(s): | are submitted: | 4 | b. Payment of Fee(s): (Ple | ase first reapply a | ny prev | iously paid issue fee: | shown above) | |
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| Authorized Signature | | | | Date No. | vemh | er 10, 2008 | | |
| Typed or printed name Christopher J. Rourk | | | Registration No. 39,348 | | | | | |
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